Case 19-13134-amc Doc 48 Filed 07/16/20 Entered 07/16/20 16:32:37 Desc Main Document Page 1 of 2

Fill in this information to identify your case:				
Eva Marie Large				
First Name Middle Name	Last Name	_		
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name	_		
United States Bankruptcy Court for the: _ Eastern District of P	Pennsylvania			
Case number19-13134	, 	Check if th	nis is:	
(If known)		An ame	ended filing	
			e as of the following date:	
Official Form 106I		MM / DI	MM / DD / YYYY	
Schedule I: Your Income	е		12/15	
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Describe Employment				
Fill in your employment information.	Debtor 1		Debtor 2 or non-filing spouse	
If you have more than one job, attach a separate page with information about additional employers.  Employment statue	us ☐ Employed ☑ Not employed		Employed Not employed	
Include part-time, seasonal, or self-employed work.	_		_	
Occupation may include student or homemaker, if it applies.				
Employer's name				
Employer's addre	ss			
	Number Street		Number Street	
			<del></del>	
	City Stat	e ZIP Code	City State ZIP Code	
How long employ	•	2.11 0000	ony state in odds	
Part 2: Give Details About Monthly Income				
Estimate monthly income as of the date you file th		report for any line wr	ite \$0 in the space. Include your non-filing	
spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines				
below. If you need more space, attach a separate she	et to this form.			
		For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2.  \$		\$0.00	\$	
3. Estimate and list monthly overtime pay.	3.	+\$0.00	+ \$	
4. Calculate gross income. Add line 2 + line 3.	4.	\$0.00	\$	

Entered 07/16/20 16:32:37 Filed 07/16/20 Doc 48 Document Page 2 of 2se number (if know Debtor 1 For Debtor 1 For Debtor 2 or non-filing spouse 0.00 Copy line 4 here..... 5. List all payroll deductions: 0.00 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 5e. Insurance 5e. 0.00 5f. Domestic support obligations 5f 0.00 5g. Union dues 5g. 0.00 5h. Other deductions. Specify: \_ 5h. 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 300.00 8a. monthly net income. 0.00 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive 0.00 Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c 823.33 8d. Unemployment compensation 8d. 0.00 8e. Social Security 8e. 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 484.00 Specify: Food Stamps, Food Stamps - For Disabled Son Jason 0.00 8g. Pension or retirement income 8g. 0.00 8h. Other monthly income. Specify: 8h 1,607.33 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. Calculate monthly income. Add line 7 + line 9. 1,607.33 1,607.33 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. From Richard Sohn -Debtor's domestic partner of 33 years. 1,237.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 2,844.33 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income

Yes. Explain: her other income increases. Debtor also is entitled to CARES Act \$600 weeklyU.C. boost, but she only

Debtor's U.C. will end December 2020. Her job may resume 2/2021 - 8/21. Food stamps will be reduced if

13. Do you expect an increase or decrease within the year after you file this form?

received it twice and it is set to expire July 31, 2020.